
DEPARTMENT POLICY

The policy in this item applies to the Child Development and Care (CDC) program only. The purpose of CDC expedited service is to help the neediest clients quickly. Certain processing requirements and actions (identified in this item) are deferred due to the shortened standard of promptness.

EXPEDITED SERVICE CRITERIA

Eligibility factors are the same for expedited as regular CDC benefits.

Applicant groups are entitled to expedited service if one of the following applies:

- The child is experiencing homelessness.
- The child is considered foster care eligible, as defined in this item.

CDC groups entitled to expedited service must do all the following:

- Complete and submit a MI Bridges Application or a MDHHS-1171, Assistance Application, with a MDHHS-1171-CDC Supplement.
- Participate in an interview (for example, in-person, telephone, etc.).
- Cooperate with certain verification requirements; see *minimum verification* in this item.

DEFINITIONS

Expedited Service

Expedited Service

Has a shorter standard of promptness and fewer verification requirements to determine CDC eligibility than are normally required.

Homelessness

A child is considered to be homeless based on the McKinney-Vento Homeless Assistance Act of 1987, as amended 2015. Examples of a child being homeless are:

- Sharing housing due to economic hardship or loss of housing.
- Living in motels, hotels, trailer parks, or camp grounds due to lack of alternative accommodations.
- Living in emergency or transitional shelters.
- Children whose primary nighttime residence is not ordinarily used as a regular sleeping accommodation (for example park benches, etc.)
- Living in cars, parks, public spaces, abandoned buildings, substandard housing, bus, or train stations.

Below are some questions that may be used to determine if a child is homeless:

- How long have you been living with others? Is this a temporary situation?
- Are you sharing housing due to loss of housing? Economic hardship? Other?
- Is your name on the lease? Could you be asked to leave at any time?
- Where would you live if you were not sharing housing?

Eligibility based on the homeless category does not need to be verified. A valid need reason is required in accordance with this policy item.

Foster Care

A child is considered foster care eligible when the child has an active MDHHS foster care case and the foster care payments are permitted to be paid to a:

- **Licensed foster parent.**
- **Relative placement** when:
 - There is a court order committing the child to MDHHS.

- MDHHS placed the child with a non-parent relative.
- The relative receives MDHHS state ward board and care funding for the child's placement.

Eligibility for CDC for active MDHHS foster care cases ends on the date the child(ren) is removed from the paid licensed foster parent's home or non-parent relative's home.

IDENTIFYING GROUPS ENTITLED TO EXPEDITED SERVICE

Bridges screens all CDC applications to identify those requiring expedited service. Answers to the questions on the assistance application provide the information needed to identify expedited service cases. Homeless and Foster Care information is input on the CDC Expedited Screening page. The group does not have to request expedited service. A group cannot waive its right to expedited service.

If the client is unable to complete the entire assistance application, an application or filing form containing the minimum information (see BAM 105) can be completed to start the standard of promptness. Answer questions related to expedited service processing on the back page of the filing form. The filing form is located in the MDHHS-1171 packet.

STANDARD OF PROMPTNESS (SOP)

For groups entitled to expedited service, CDC eligibility must be determined by the seventh calendar day following the date of application; see BAM 115, **Standard of Promptness, CDC Only**.

EXCEPTIONS TO THE EXPEDITED STANDARD OF PROMPTNESS

Extend the standard of promptness in the following situations:

- A telephone interview is conducted, but the application is still incomplete. The standard of promptness begins on the day the signed, completed application is received by the local office.

- Entitlement to expedited service is not identified during the screening process but is discovered by the specialist during normal processing. The application must then be processed according to expedited service standards. The standard of promptness begins on the date of discovery. The discovery date must be documented in the case record.

INTERVIEWS

CDC groups entitled to expedited service must participate in an interview. See *BAM 115, Interviews*, for specific interview policy. If the application is filed in person, the interview **must** be held the same day unless the client requests a postponement. If the client qualifies for an out-of-office or telephone interview, it must be attempted no later than the first working day following the application submission. Document all attempts to reach the client.

If the CDC group applied by mail, fax, through MI Bridges, etc., and could not be contacted within one day to be interviewed, this fact must be documented in the case record. The interview must be conducted no later than one working day after contact is made.

Provide any necessary help in completing the application during the interview. If a telephone interview is conducted, and the application is incomplete, complete it and mail a copy to the client for review and signature.

MINIMUM VERIFICATION

In all cases, the applicant's identity must be verified; see BEM 221. Reasonable effort must be made to verify:

- The Social Security number (SSN) of the CDC grantee.
- The valid need reason for all P/SPs.
- All other eligibility factors.

Note: CDC benefits cannot be delayed beyond the expedited standard of promptness solely because these eligibility factors (other than identity) have not been verified.

Certify approval for initial pay periods based on any verifications received and the client's statement for those verifications that cannot be immediately acquired. Follow policy in *BAM 130, Verification and Collateral Contacts*, for verification due dates, extensions and department responsibilities when a client requests assistance with gathering verifications.

CDC FAULT DETERMINATION

For pending CDC expedited service applications, determination of fault must be made on the seventh day, after the date of application.

The CDC group is at fault when all required actions have been taken, but the CDC group has not taken one or more of the following actions:

- Completed the application form.
- Provided verification of identity.
- Completed an interview.

If the CDC group is at fault, answer “yes” to the “Extend SOP due to group at fault” question on the *Program Request-Details* screen. This prevents the registration from being overdue on worker registration reports and extends the standard of promptness to 30 days following the date of application.

BENEFIT PERIODS

CDC expedited service approval results in a 45-day presumptive eligibility period. Benefits are approved during this timeframe based on client statement for any eligibility criteria that has not been verified (at eligibility determination).

Once all verifications have been received, certify the eligibility based on CDC eligibility policy. The 12-month continuous eligibility period begins upon an approval certification.

Note: If the eligibility determination for the 12-month continuous eligibility period results in a reduction in benefits from the presumptive eligibility, this is not considered a negative action.

SUBSEQUENT BENEFITS

If waived verifications/actions are not met by the end of the 45-day presumptive eligibility period, take the required actions in Bridges timely to close the ongoing CDC benefits.

Benefits issued for these children prior to receiving all verifications shall not be considered an error or improper payment, even if verifications are not received or the group is determined ineligible once verifications are received.

LIMITS ON EXPEDITED SERVICE

There is no limit to the number of times a group can be approved under expedited procedures. However, prior to the next expedited approval, the CDC group **must** do one of the following:

- Complete the verification requirements that were postponed at the last expedited approval (regardless of the amount of time that has expired).
- Be processed under normal application processing standards.

DENIAL OF EXPEDITED SERVICE

Verbally notify the client of the denial if expedited service was registered. Process applications denied for expedited service according to normal application processing standards described in BAM 115.

When the client is denied expedited service but appears eligible for CDC benefits, Bridges will do both of the following:

- Automatically change the application to a regular CDC application using the original application date once you've entered the client's information on the expedited screening page in the Program Request logical unit of work.
- Set the due date to 30 days from the original application date.

Advise clients denied expedited service that they can request a supervisory conference and/or a hearing if they disagree with the decision; see BAM 600. Do not hold the application pending the result of a hearing. If the client requests a conference, it must be held within two working days of the request unless the client requests that it be scheduled later.

LEGAL BASE

The Child Care and Development Block Grant (CCDBG) Act (42 USC § 9858 *et seq.*), as amended by the CCDBG Act of 2014 (Pub. L. 113-186), Sec. 98.51.
McKinney-Vento Homeless Assistance Act of 1987, amended 2015, 42 USC 11431 *et seq.*